FEE TRANSMITTAL FY 2008

	Attorney Do					cket No.		49974-0023US (formerly 49981-018US)			
Confirmation					n No.	No. 2286					
METHOD OF PAYMENT							FEE CALCULATION (continued)				
□ Payment Enclosed: □ Payment Enclosed:							4. ADDITIONAL FEES				
_ ,			Large Small								
	der 🛭 Other		Entity	Ent	ity						
The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840						Fee(\$)	Fee	(\$)	Fee Description	Fee Paid	
⊠	this sheet enclos	ed).	130		65	Surcharge - late filing fee or oath					
Additional fee required under 37 CFR 1.16 and 1.17.								25	Surcharge - late provisional filing fee or cover sheet		
								130	Non-English specification		
☐ Applica			2,520 120	2,	520	Request for ex parte re-examination					
FEE CALCULATION								60	Extension for reply within 1st mo.	\$60.00	
1. BASIC FILING, SEARC						450		225	Extension for reply within 2 rd mo.		
Application Type	Filing	Search	Examination	Fee Paid	d 	1,020		510	Extension for reply within 3 rd mo.		
Utility	300	500	200			1.590		795	Extension for reply within 4 mo.		
Design	200	100	130			2,160 1,08			Extension for reply within 5th mo.		
Plant	200	300	160			500		250	Notice of Appeal		
Reissue	300	500	600				500 250		Filing a brief in support of an appeal		
Provisional	200	0	0			1,000		500	Request for oral hearing		
			y Discount			400		0	Petitions to the Director		
		1	. TOTAL			180		180	Submission of IDS		
2. EXCESS CLAIM FEES Fee Small Entity Fee (\$)						790			Filing a submission after final rejection (37 CFR 1.129(a))		
Each ole m over 20 or, for Ressues, each ole m over 20 and more than in the original patent 50 25											
Over 20 and more than in the original parent								395	For each additional invention to be		
Each independent claim over 3 or, for Reissues, 200 100 each independent claim more than in the original									examined (37 CFR 1.129(b))		
patent.						100		100	Certificate of Correction for applicant's		
Total Claims Extra Claims Fee Paid					(\$)	130	41101				
- 20 or HP= x \$=											
HP = highest number of total claims paid for, if greater than 20 Indep. Claims Fee Paid (\$)							e (Spec	ify)			
Indep. Claims Extra Claims Fee Paid (\$)											
-3 or HP= x \$ =						Other fee (Specify)			4. TOTAL:	660.00	
HP = highest number of total claims paid for, if greater than 3 Multiple Dependent Fee(\$) Small Entity fec (\$) Fee Paid (\$)									4. IOTAL:	\$60.00	
Multiple Dependen Claims	t Fee(\$) 360		II Entity Ice (\$)	ree Paid	1 (2)						
									TOTAL AMOUNT S	BMITTED	
2. TOTAL:							(\$60.00)				
3. APPLICATION SIZE FEE							SIGNATURE BLOCK				
If the specification									Respectfully, submitted,		
fee due is \$250 (\$1 there of. See 35 U.				ts or fracti	on				Respections, submitted,		
there of, See 33 C.	3.C. 41(a)(1)(C	i) and 37 C	rk 1.10(s).			1			$M \leq M$		
Total I Sheets						Date: Ma			XXXX	_	
			up to a		-	Reg. No.:			Paul M. Booth		
-100= (/50=	whole	number x	=	0.00	Tel. No.:				s)	
3. TOTAL:							Fax No.: (202) 416-6899 Proskauer Rose LLP				
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